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Bib Data Sheet

SERIAL NUMBER 09/582,337	FILING DATE 09/18/2000 RULE -	CLASS 514	GROUP ART UNIT 1614 1644	ATTORNEY DOCKET NO. SHIM-006
APPLICANTS Takuya Tamatani, Kanagawa, JAPAN; Katsunari Tezuka, Kanagawa, JAPAN; Shinji Sakamoto, Kanagawa, JAPAN; Masaharu Takigawa, Okayama, JAPAN;				
** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/JP98/05697 12/16/1998				
** FOREIGN APPLICATIONS ***** JAPAN 9/367699 12/25/1997 JAPAN 10/356183 12/15/1998				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/10/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY JAPAN	SHEETS DRAWING 49	TOTAL CLAIMS 1
Verified and Acknowledged Examiner's Signature: [Signature] Initials: [Initials]		INDEPENDENT CLAIMS 1		
ADDRESS Bozicevic Field & Francis Suite 200 200 Middlefield Road Menlo Park, CA 94025				
TITLE Monoclonal antibody against connective tissue growth factor and medicinal uses thereof				
FILING FEE RECEIVED 1378	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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APPLICATION NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO
09/582,337	09/18/2000	424	1644	SHIM-006
APPLICANT TAKUYA TAMATANI, KANAGAWA, JAPAN; KATSUNARI TEZUKA, KANAGAWA, JAPAN; SHINJI SAKAMOTO, KANAGAWA, JAPAN; MASAHARU TAKIGAWA, OKAYAMA, JAPAN. <i>OK, PNH</i>				
CONTINUING DOMESTIC DATA*** VERIFIED <i>None, PNH</i>				
371 (NAT'L STAGE) DATA*** VERIFIED THIS APPLN IS A 371 OF PCT/JP98/05697 12/16/1998 <i>OK, PNH</i>				
FOREIGN APPLICATIONS*** VERIFIED JAPAN 9/367699 12/25/1997 JAPAN 10/356183 12/15/1998 <i>OK, PNH</i>				
Foreign priority claimed 35 USC 119 (a-d) conditions met <input checked="" type="radio"/> yes <input type="radio"/> no Allowance		STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS
Verified and acknowledged <i>PNH</i> Examiner's Name Initials		JPX	49	1
INDEPENDENT CLAIMS		1		
ADDRESS BOZICEVIC FIELD & FRANCIS SUITE 200 200 MIDDLEFIELD ROAD MENLO PARK, CA 94025				
TITLE MONOCLONAL ANTIBODY AGAINST CONNECTIVE TISSUE GROWTH FACTOR AND MEDICAL USES THEREOF				
FILING FEE RECEIVED \$*****0	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:		<input type="radio"/> All Fees <input type="radio"/> 1.16 Fees (Filing) <input type="radio"/> 1.17 Fees (Processing Ext. of Time) <input type="radio"/> 1.18 Fees (Issue) <input type="radio"/> Other _____ <input type="radio"/> Credit	